

Input for shaping health exchanges

Leon Balents

What will be available should have great transparency. (Competitive with other states, federal and other country plans). This implies a federal compiling and comparisons be available perhaps on an internet site. We should learn from the worldwide infrastructure of health care.

The judging of which plans that we commit to should have a greater number of users (patients?) rather than insurance, government and medical agencies.

Since there are quite comprehensive plans available now that include really necessary options like dental care, preventative physical therapy, and help for needy children and adults these should also be included despite the initial thoughts that these are very expensive as the competition can ease these fears.

One should know how price quotes are derived: by consideration of age, of previous health history, of family history.

If small companies or groups are able to obtain and promise lower costs the reasons for these better benefits should be disclosed if all other problems covered are equal.

If the \$1 million planning grant has already started a rough plan it should be available at an internet site. How and who is creating this input should be revealed.

Distinctions for individuals, male, female and family plans should be clear.

Just offering my thoughts,

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